TO SPE OF	: ART UNIT 1600 (1623	3)	•
		<b>1</b>	
SUBJECT	: Request for Certificate of	of Correction on Patent No.: 6,995,20	<u>60</u>
A response is	requested with respect	to the accompanying request for a	a certificate of correction.
Please comp	plete this form and retu	rn with file *(PFW), within 7 da	ays to:
Certificates	of Correction Branch	n – 2900 South Tower ste.9A4	3A
Palm location	n <b>7580</b> or forward *( <b>IF</b>	W) to scanning using documer	nt code COCX.
			•
*Ok to enter	Changes to claims as r	eq. in COCIN?	
•			
		Ernest C. White, LIE (703) 308	8-9390x122
Thank You For	r Your Assistance	Certificates of Correction	
The request	for inquire the above		,
Note your decision	for issuing the above on the appropriate box.  Approved	e-identified correction(s) is h  All changes apply.	,
Note your decision XXXX	on the appropriate box.	e-identified correction(s) is h  All changes apply.	,
Note your decision  x⊠x  □	Approved	e-identified correction(s) is h  All changes apply.	ereby: n changes <b>do not</b> apply.
Note your decision  x⊠x  □	Approved Approved in Part	e-identified correction(s) is h  All changes apply.  Specify below which	ereby: n changes <b>do not</b> apply.
Note your decision  ***  Comments:	Approved Approved in Part	e-identified correction(s) is h  All changes apply.  Specify below which  State the reasons for	ereby: n changes <b>do not</b> apply.
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Note your decision  ***  Comments:	Approved Approved in Part Denied	e-identified correction(s) is h  All changes apply.  Specify below which  State the reasons for	ereby: n changes <b>do not</b> apply.